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URBAN DISTRICT OF STANLEY



ANNUAL REPORT

of the

Medical Officer of Health

(A. L. TAYLOR, M.D., Ch.B., D.P.H.)

and the

Sanitary Inspector

(D. WALKER, Cert. R.S.I., A.R.S.I., M.S.I.A.)

1955

WAKEFIELD :

W. H. MILNES (SUCCRS.) LTD.

STANLEY URBAN DISTRICT COUNCIL.

ANNUAL HEALTH REPORT.

STATISTICAL MEMORANDA FOR 1955.

Area in Acres	...	...	...	5,169
Registrar General's Estimate of Population for 1955				16,670
Number of Inhabited Houses, 1955, according to Rate Book	...	...	...	5,159
Rateable Value, Year commencing 1.4.55	...			£70,399
Net Product of a Penny Rate, Year commencing 1.4.55				£272

VITAL STATISTICS IN 1955.

			M.	F.	Total
Live Births.					
Legitimate	...	...	95	105	200
Illegitimate	...	...	6	—	6
		Total	...	101	105
				206	
Still Births.					
Legitimate	...	...	2	4	6
Illegitimate	...	...	—	—	—
		Total	...	2	4
				6	

Birth Rate.

Birth Rate (live and still) per 1,000 of the estimated resident population (corrected)	...	12.46
--	-----	-------

Deaths.

		M.	F.	Total
All Ages	...	85	62	147
Death Rate per 1,000 of the estimated resident population (corrected)	...			10.04

	M.	F.	Total
Deaths of Infants under 1 year ...	1	4	5

Death Rate of Infants under 1 year :—

All Infants per 1,000 live births ...			24·3
Legitimate Infants per 1,000 legitimate live births ...			25·0
Illegitimate Infants per 1,000 illegitimate live births ...			0·0
Deaths from Diarrhoea (under 2 years of age)			1
Rate per 1,000 population ...	...		0·06
Rate per 1,000 live births ...	...		4·86
Deaths from Measles (all ages) ...	...		Nil.
Deaths from Whooping Cough (all ages) ...	...		Nil.
Deaths from Cancer (all ages) ...	...		33

Maternal Mortality.

Deaths ...	...	Nil.
Rate per 1,000 (live and still) births	...	0·0

RECORD OF DEATHS IN AGE GROUPS,
1955.

Age				Males	Females	Total
Under 1 year	...			1	4	5
1—5 years	...	...		—	1	1
5—10	„	...	...	—	1	1
10—15	„	...	...	1	—	1
15—20	„	...	...	—	1	1
20—25	„	...	...	1	—	1
25—35	„	...	...	3	—	3
35—45	„	...	...	1	—	1
45—55	„	...	...	10	4	14
55—65	„	...	...	13	10	23
65—70	„	...	...	14	6	20
70—75	„	...	...	11	13	24
75—80	„	...	...	13	10	23
80—85	„	...	...	11	7	18
85—90	„	...	...	6	3	9
Over 90 years...	...			—	2	2
Totals				85	62	147

Principal Vital Statistics for the year 1955.

				Urban District of Stanley	Aggregate of Urban Districts	Aggregate of Rural Districts	West Riding Admin. County	England and Wales
Population	..	..	..	16,670	1,167,000	443,300	1,610,300	*
Births	{	Males	..	101	8,831	3,831	12,662	*
		Females	..	105	8,405	3,534	11,939	*
		Total	..	206	17,236	7,365	24,601	*
Deaths	{	Males	..	85	7,527	2,293	9,820	*
		Females	..	62	7,108	1,959	9,067	*
		Total	..	147	14,635	4,252	18,887	*
Deaths under one year	{	Males	..	1	250	119	369	*
		Females	..	4	184	92	276	*
		Total	..	5	434	211	645	*
Still Births	{	Males	..	2	238	107	345	*
		Females	..	4	230	91	321	*
		Total	..	6	468	198	666	*
Total Live and Still Births				212	17,704	7,563	25,267	*
					CRUDE RATES.			
Birth (Live)	..	..	.	12·4	14·8	16·6	15·3	15·0
Death (All causes)	..	..	..	8·8	12·5	9·6	11·7	11·7
Infective and Para. Dis. excl. Tub. but incl. Syph. & other V.D.				0·06	0·06	0·07	0·07	*
Tuberculosis—Respiratory				0·06	0·11	0·08	0·11	0·13
Tuberculosis—Other				—	0·02	0·02	0·01	0·02
Tuberculosis—All Forms				0·06	0·13	0·10	0·12	0·15
Cancer				1·98	2·03	1·54	1·90	*
Vascular lesions of Nervous system				1·14	2·09	1·40	1·90	*
Heart and Circulatory Diseases				2·76	4·71	3·55	4·39	*
Respiratory Diseases				0·90	1·28	1·03	1·21	*
Maternal Mortality				—	0·45	1·19	0·67	0·64
Infant Mortality				24·3	25·2	28·6	26·2	24·9
Stillbirth				28·3	26·4	26·2	26·4	23·1

* Figures not available.

All the Maternal Mortality Rates quoted in this Schedule are per 1,000 Live and Still Births.

STANLEY URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

Medical Officer of Health,

1955.

*To the Chairman and Members of the
Stanley Urban District Council.*

Mr. Chairman and Gentlemen,

This, my Annual Report for 1955, will follow closely the pattern of recent Reports. Experience has shown that these have proved satisfactory in form and in the scope of the information contained therein. I am glad to report that a continued satisfactory state of health and wellbeing exists in the Public Health field in your District. B.C.G. Vaccination was introduced during the year and the response was reasonably satisfactory. No major outbreak of epidemic disease occurred, apart from the expected seasonal prevalence of Measles. A further fall in the Birth Rate is a notable feature and must be regarded with disquiet.

Social conditions remain reasonably good and the standard of living of the population as a whole has reached a level as high as, or higher than, any previously known.

Matters relating to Cleansing, Salvage, Meat and Food Inspection, etc., are dealt with by Mr. Walker in his report as Senior Public Health Inspector. Once more I should like to express my appreciation of Mr. Walker's services and the readiness with which he responds to any approach.

My relationships with yourselves have remained of the happiest. This fact is one to which I attach great importance as being a major factor in the smooth and satisfactory working of the Preventive Medical Services in the Stanley area. I should also like to express my appreciation of the cordial co-operation given me by the Clerk of the Council and by other officials whom, from time to time, it has been necessary to contact.

This Report will, once again, include an account of the Divisional Preventive Medical Services administered by the Local Health Authority. It is important that you should realise the volume of work undertaken and the thoroughness with which all preventive measures are applied.

I remain, Gentlemen,

Yours faithfully,

A. L. TAYLOR,

Medical Officer of Health.

PUBLIC HEALTH OFFICERS :

Medical Officer of Health (part-time):—

Dr. A. L. Taylor, M.D., D.P.H.

Chief Sanitary Inspector :—

D. Walker, Cert., R.S.I., A.R.S.I., M.S.I.A., Certified Inspector of Meat and Other Foods.

Additional Sanitary Inspector :—

L. Jaques, M.S.I.A., Certified Inspector of Meat and Other Foods, Certified Smoke Inspector.

Clerks :—

Mrs. M. Wood, Mr. J. G. Bower.

COMMENTS ON STATISTICAL DATA.

The further decrease in the Birth Rate is disappointing. Last year's figure of 13·18 was low, but the present figure of 12·46 is much lower than the aggregate for the Urban Districts of the West Riding. This is very unsatisfactory and the rate is too low adequately to maintain a population of balanced age. The causes are unknown to me, but there is no doubt that the still difficult housing situation must play a part.

As against the foregoing, it is gratifying to be able to record a return to a reasonably low Infantile Mortality Rate. The present rate of 24·3 deaths per thousand live births compares very favourably with the aggregate of Urban Districts in the West Riding, and with the Country as a whole.

The District Death Rate at 10·04 per thousand population stands favourable comparison with the rest of the County.

No Maternal Death occurred during the year and there was no notified case of Puerperal Pyrexia.

Tuberculosis appears, at long last, to be yielding to the modern preventive and therapeutic measures vigorously being applied. The Tuberculosis death Rate in Stanley compares very favourably with that recorded in the country as a whole.

It is reasonable to claim that, with the exception of the Birth Rate, the figures published disclose a very satisfactory state of Public Health in the Stanley Urban District. I must express the hope that there will be an increase in the Birth Rate in future years.

Causes of Death in the Stanley Urban District, 1955.

CAUSE OF DEATH				MALES.	FEMALES.
All Causes				85	62
1.	Tuberculosis, respiratory	..	..	1	..
2.	Tuberculosis, other	..	..	..	..
3.	Syphilitic disease ..	..	..	..	..
4.	Diphtheria ..	..	..	..	..
5.	Whooping Cough ..	..	..	..	..
6.	Meningococcal infections	..	..	..	..
7.	Acute Poliomyelitis	..	..	1	..
8.	Measles ..	..	..	..	..
9.	Other infective and parasitic diseases	..	..	..	..
10.	Malignant neoplasm, stomach	..	..	5	..
11.	Malignant neoplasm, lung, bronchus	..	..	8	1
12.	Malignant neoplasm, breast ..	..	..	1	1
13.	Malignant neoplasm, uterus ..	..	..	..	2
14.	Other malignant and lymphatic neoplasms	..	..	9	6
15.	Leukaemia, aleukaemia	..	..	..	..
16.	Diabetes ..	..	..	..	1
17.	Vascular lesions of nervous system	..	..	9	10
18.	Coronary disease, angina ..	..	..	15	7
19.	Hypertension with heart disease	..	..	..	1
20.	Other heart disease	..	..	6	11
21.	Other circulatory disease	..	..	1	5
22.	Influenza ..	..	..	..	..
23.	Pneumonia ..	..	..	5	1
24.	Bronchitis ..	..	..	7	1
25.	Other diseases of the respiratory system	..	..	1	..
26.	Ulcer of stomach and duodenum	..	..	3	3
27.	Gastritis, enteritis and diarrhoea	..	..	..	1
28.	Nephritis and nephrosis	..	..	1	..
29.	Hyperplasia of prostate ..	..	..	1	..
30.	Pregnancy, childbirth, abortion	..	..	..	..
31.	Congenital malformations	..	..	..	3
32.	Other defined and ill-defined diseases	..	..	3	6
33.	Motor vehicle accidents	..	..	2	..
34.	All other accidents	..	..	4	2
35.	Suicide ..	..	..	2	1
36.	Homicide and operations of war	..	..	..	..
Live Births.	Total	..	..	101	105
	Legitimate	..	..	95	105
	Illegitimate	..	..	6	..
Still-Births.	Total	..	..	2	4
	Legitimate	..	..	2	4
	Illegitimate	..	..	..	..
Deaths of Infants under 1 year of age.	Total	..	..	1	4
	Legitimate	..	..	1	4
	Illegitimate	..	..	..	..
Population				16,670	
Comparability Factors :--					
Births				0.98	
Deaths				1.14	

INFANTILE MORTALITY IN 1955.

Deaths from Stated Causes under One year of Age.

CAUSES OF DEATH.		Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total under 1 Year.
Broncho-pneumonia	}	-	-	-	-	-	-	I	I	-	2
Prematurity		-	-	-	-	-	-	-	-	-	-
Cardiac abnormality.	..	I	-	-	-	I	-	-	-	-	I
Castro-enteritis.	.. ..	-	-	-	-	-	-	I	-	-	I
Congenital hydrocephalus.		-	-	-	-	-	-	I	-	-	I
Total	..	I	-	-	-	I	-	3	I	-	5

INFANT DEATHS PER THOUSAND LIVE BIRTHS.

1918—1925	1926—1935	1936—1945	1946—1955
	1926 98·3	1936 34·7	1946 31·7
	1927 67·3	1937 29·4	1947 53·1
1918 133·2	1928 81·1	1938 69·5	1948 32·3
1919 104·3	1929 62·3	1939 42·9	1949 25·3
1920 100·5	1930 65·8	1940 72·3	1950 53·0
1921 98·0	1931 60·2	1941 37·8	1951 39·1
1922 98·0	1932 84·5	1942 47·6	1952 33·3
1923 87·3	1933 56·1	1943 54·2	1953 21·2
1924 89·0	1934 85·0	1944 50·2	1954 48·2
1925 103·0	1935 30·1	1945 45·0	1955 24·3
Average— 101·7	Average— 69·1	Average— 48·3	Average — 38·2

Details of STILL-BIRTHS
for the past five years.

Year	No. of Live Births	No. of Still-Births	Proportion of Stillbirths per 100 Live Births
1951	230	5	2·2
1952	210	6	2·8
1953	236	9	3·8
1954	228	7	3·1
1955	206	6	2·9

Details of NEO-NATAL DEATHS for the past five years.

Year	No. of Live Births	No. of Neo-Natal Deaths	Proportion of Neo-Natal deaths per 100 Live Births
1951	230	5	2·2
1952	210	7	3·3
1953	236	1	0·04
1954	228	7	3·0
1955	206	1	0·5

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

The administrative machine established in 1948 continues to function on the same lines. The Medical Officer of Health is also appointed in a similar capacity to two adjacent County districts and serves the Local Health Authority in the post of Divisional Medical Officer, in respect of the services administered by the West Riding County Council.

Another slight increase in population occurred, partly as the result of the building of two Coal Board housing estates in the Divisional area, the approximate population for the whole Division being 54,620.

Divisional administration of all the Health services, with the exception of the Ambulance service and the School Dental service, is the responsibility of the Divisional Medical Officer. The Divisional Health Office is situated in Rothwell and engages the services of a clerical staff of 9. The fact that this staff is kept actively and busily employed is some indication of the very considerable volume of work undertaken. I am still of the opinion that the Divisional unit, of which your district forms a constituent part, is of a size ideal for the close personal supervision most beneficial to the functions undertaken. Relationships have continued excellent on all sides, and the ready response of Divisional Education Officers and School staffs, Hospital authorities and general practitioners, has contributed in no small measure to the ease and efficiency with which the running of the various services has been carried out.

REPORT ON THE DIVISIONAL MEDICAL
SERVICES ADMINISTERED IN THE STANLEY
URBAN DISTRICT BY THE LOCAL HEALTH
AUTHORITY.

There has been no major change during 1955 in the administrative and medical staffs engaged in public health work in your District. The Central Clinic at Rothwell continues to prove most valuable and is readily accessible from all parts of the area

Clinical duties in the Maternity and Child Welfare and School Medical Services are carried out by two Assistant County Medical Officers. Each of these has had a long experience of work in the Divisional area and each is now very familiar with the special problems arising in this part of the world.

The Home Nursing section is at full strength, but the position in relation to Domiciliary Midwifery and Health Visiting gives rise to some anxiety, of which I will say more later on in the Report.

We are still fortunate in having available the services of an excellent and competent Dental Surgeon who attends the local Dental Clinic in Rothwell most days in the week. His work is much appreciated in the area and his services are increasingly called for in the treatment of school children and expectant and nursing mothers.

School Medical Service.—The total number of school children in the area is 8,071. Two Assistant County Medical Officers undertake routine school medical inspections. During 1955, it has been possible to implement the suggestion that, during the school life of the child, four such routine medical inspections will be carried out, as distinct from the three inspections which were previously the rule. In addition, special examinations are made of all children needing special educational provision on the grounds of health, physical handicap, mental subnormality, or maladjustment.

The Health Visitors continue to spend a portion of their time as school nurses. I am convinced that this system is an ideal one because of the close liaison which the Health Visitor has with the child's family and home environment. It is gratifying to note that out of the very large number of heads examined by school nurses, only a very small total number of individual pupils were found to be infested. Most of these infestations were of a slight or trivial nature and out of the total it was only necessary to issue a Cleansing Notice in respect of one child. This is a most satisfactory state of affairs, and reflects very great credit on the increasing standards of parental care and on the vigilance of the school nurses.

The nutritional level of children continues good. It is an obvious truth that nutritional standards, by and large, have never before been so high. I can say in all honesty that in my many years' experience in this district, I have never seen the child population as a whole look so healthy, well clothed, or so obviously full of abounding vitality.

No delay occurs in obtaining ophthalmic treatment, or in the provision of spectacles.

The waiting list for Ear, Nose and Throat operations continues to be very short, and beds are readily available at Seacroft Hospital, Clayton Hospital or Leeds Public Dispensary.

The co-operation afforded by the Headmasters and teaching staffs of schools has been a continued and most welcome feature.

MEDICAL INSPECTION RETURNS

Year ended 31st December, 1955.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

A. Periodic Medical Inspections.

Number of Inspections in the prescribed Groups:—

Entrants	...	...	885
7 to 8 year group	...	...	993
Last year primary	...	...	670
First year secondary	...	...	35
Last year secondary	...	...	359
*Other periodic	...	...	29
Total			2,971

B. Other Inspections.

Number of Special Inspections	...	98
Number of re-inspections	...	243
Total		341

*Other periodic inspections would include regular routine medical inspections falling outside the prescribed groups, e.g. termly or more frequent inspections at special schools.

C. Pupils found to require Treatment.

Number of Individual Pupils found at Periodic Medical Inspections to require treatment for a defect (excluding Dental Diseases and Infestation with Vermin).

Group. (1)	For Defective Vision (excluding squint). (2)	For any of the other conditions recorded in following Table (3)	Total individual pupils. (4)
Entrants ...	31	231	246
7 to 8 year group ...	59	192	233
Last year primary ...	67	124	186
First year secondary	1	—	1
Last year secondary	41	78	110
Other Periodic ...	—	—	—
Total ...	199	625	776

**A. RETURN OF DEFECTS
FOUND BY MEDICAL INSPECTION IN THE YEAR
ENDED 31st DECEMBER, 1955.**

Defect Code No.	Defect or Disease.	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of Defects		No. of Defects	
		Requir- ing treat- ment.	Requiring to be kept under observation, but not requiring treatment	Requir- ing treat- ment.	Requiring to be kept under observation, but not requiring treatment.
	(1)	(2)	(3)	(4)	(5)
4	Skin	109	82	5	3
5	Eyes—				
	a. Vision ...	199	96	7	2
	b. Squint ...	44	27	—	1
	c. Other ...	7	18	—	1
6	Ears—				
	a. Hearing ...	9	19	4	—
	b. Otitis Media	53	16	2	—
	c. Other ...	6	5	—	—
7	Nose or Throat ...	115	78	5	3
8	Speech	7	13	1	—
9	Cervical Glands ...	6	40	—	—
10	Heart and Circulation	20	54	—	4
11	Lungs	64	15	3	—
12	Developmental—				
	a. Hernia ...	4	2	—	—
	b. Other ..	2	1	—	—
13	Orthopaedic—				
	a. Posture ...	67	26	—	—
	b. Flat foot ...	11	28	—	4
	c. Other ...	61	87	2	4
14	Nervous System—				
	a. Epilepsy ...	3	4	—	—
	b. Other ...	4	14	—	3
15	Psychological—				
	a. Development	17	24	—	2
	b. Stability ...	31	25	2	1
16	Other	36	19	1	5

B. CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR, IN AGE GROUPS.

Age Groups (1)	Number of pupils inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)	No. (7)	% of Col. 2 (8)
Entrants	885	513	58·0	372	42·0	—	—
7 to 8 year group ...	993	619	62·3	373	37·6	1	0·1
Last year primary ...	670	410	61·2	260	38·8	—	—
First year secondary	35	27	77·14	8	22·86	—	—
Last year secondary	359	216	60·2	143	39·8	—	—
Other Periodic ...	29	21	72·4	8	27·6	—	—
Total ...	2,971	1806	60·79	1164	39·17	1	·04

INFESTATION WITH VERMIN.

- (i) Total number of examinations in the schools by the school nurses or other authorised persons ... 15,484
- (ii) Total number of *individual* pupils found to be infested 254
- (iii) Number of individual pupils in respect of whom cleansing notices were issued. (Section 54 (2), Education Act, 1944) 1
- (iv) Number of individual pupils in respect of whom cleansing orders were issued. (Section 54 (3), Education Act, 1944) —

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Special Schools).

DISEASES OF THE SKIN (excluding uncleanness).

		Number of cases treated or under treatment during the year	
		By the Authority	Otherwise
Ringworm— (i) Scalp ...	...	—	—
(ii) Body ...	...	—	—
Scabies .. ...	...	—	—
Impetigo ... ..	...	41	—
Other skin diseases ...	...	21	—
Total ...		62	—

EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	by the Authority	Otherwise
External and other, excluding errors of refraction and squint	—	—
Errors of Refraction (including squint) ...	—	523
Total ...	—	523
Number of pupils for whom spectacles were—		
(a) prescribed ...	130	—
(b) obtained ...	123	—

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases treated	
	by the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear ...	—	4
(b) for adenoids and chronic tonsillitis ...	—	18
(c) for other nose and throat conditions ...	—	1
Received other forms of treatment ...	—	—
Total ...	—	23

ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in Hospitals ...	6	
(b) Number treated otherwise— e.g. in clinics or out-patient departments ...	by the Authority	Otherwise
	—	—

CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics ...	10	—

SPEECH THERAPY.

	Number of cases treated	
	by the Authority	Otherwise
Number of Pupils treated by Speech Therapists ...	47	—

OTHER TREATMENT GIVEN.

	Number of cases treated	
	by the Authority	Otherwise
(a) Miscellaneous minor ailments ...	174	—
(b) Other (specify):—		
1. U.V.R. ...	102	—
2. Paediatric ...	—	35
3. Surgical ...	—	21
4. Dermatology ...	—	2
5. Medical ...	—	5
Total ...	276	63

SCHOOL MEDICAL SERVICE.
CONSULTANT E.N.T. SERVICE.

Consultant Clinic.

1. Number of sessions held during the year ... Nil

	Pre-School children	School children
2. No. of individual children seen by Consultant, including those continuing attendance from previous year ...	—	—
3. No. of (2) above referred for operative treatment ...	—	—
4. No. of children—		
(a) who obtained operative treatment during the year ...	—	—
(b) treated at school clinics ...	—	—
5. Total number of attendances at Con- sultant clinic ...	—	—

CONSULTANT ORTHOPAEDIC SERVICE.

A. Consultant Clinic.

1. No. of Sessions held during the year 10

	Pre-school children	School children
2. No. of individual patients seen by Consultant, including those continuing attendance from previous year	7	11
3. No. of (2) above:—		
(a) referred for operative treatment as short-stay cases only	—	1
(b) recommended long-stay hospital school	—	—
(c) recommended treatment by orthopaedic nurse or physiotherapist:—		
(i) at treatment centres	—	—
(ii) domiciliary	—	—
4. No. of children who obtained operative treatment during the year	—	1
5. Total number of attendances at the Consultant clinic	8	14

B. Treatment Centres.

1. No. of Sessions held during the year —

	Pre-school children	School children
2. Total number of patients treated (including cases continuing treatment from previous year)	—	—
3. Total number of attendances ...	—	—

C. Domiciliary Treatment.

	Pre-school children	School children
1. Total number treated	—	—
2. Total number of visits to patients' homes	—	—

D. Appliances.

	Pre-school children	School children
Number of appliances :—		
(a) recommended	—	—
(b) obtained	—	—

PAEDIATRIC SERVICE.**Consultant Clinics.**

1. Number of sessions held during year 9

	Pre-school children	School children
2. Number of individual patients seen :—		
(a) new cases	8	11
(b) cases attending from previous year(s)	7	14
3. Total number of attendances at clinics	22	36
4. Summary of type of defect for which referred :—		
Growth and Development	5	3
Cardiac	2	8
Congenital Abnormality	3	—
Epilepsy	1	—
Respiratory	2	4
Eneuresis	1	3
Constipation	1	—
Nervous System	—	1
Behaviour	—	3
Mental Retardation	—	1
Persistent Headaches	—	1
Peripheral Cyanosis	—	1

SPEECH THERAPY.

1.	Total number of sessions held during year	128
----	---	-----	-----	-----

2.	(a)	No. of new cases treated during year...	...	30
	(b)	No. of cases already attending for treatment from previous year	... ..	17
	(c)	Total number of cases treated (a plus b)	...	47
3.		No. of cases awaiting treatment at end of year	...	13
4.		No. of visits made to schools	... ..	21
5.		No. of home visits	... ..	7

Analysis of Cases treated during the year.

1.	Stammering	... ..	15
2.	Defects of articulation	... ..	26
3.	Other defects	... ..	5
4.	Defective speech due to—		
	(i)	Educational sub-normality	... .. 2
	(ii)	Deafness —

Analysis of cases discharged.

	No. of children discharged during year	... ..	22
1.	Speech normal	... ..	13
2.	Speech improved	... ..	2
3.	Unsuitable for treatment	... ..	1
4.	Non-co-operation	... ..	5
5.	Left school	... ..	—
6.	Left district	... ..	—
7.	Other reasons (specify)		
	Attending new school	... ..	1

CHILD GUIDANCE TREATMENT.

	Boys	Girls	Total
1. No. of new cases seen during year ...	5	2	7
2. No. of cases continuing attendance from previous year	3	—	3
3. Total number of cases seen during year	8	2	10
4. Total number of attendances made during year for—			
(a) individual interview	11	2	13
(b) group therapy	10	—	10
5. No. of cases recommended for residential treatment in—			
(a) Hostel for Maladjusted Children	1	—	1
(b) E.S.N. Special School	—	—	—
(c) Other	1	—	1
6. No. of cases referred for psychiatric opinion	—	—	—
7. No. of cases examined at the particular request of the Magistrates	—	—	—
8. Types of problem for which cases were referred to Child Guidance Clinic—			
(a) Behaviour	5	1	6
(b) Delinquency... ..	2	—	2
(c) Nervous problems	—	1	1
(d) Eneuresis	1	—	1
(e) Others	—	—	—

MEDICAL EXAMINATION OF ENTRANTS TO TRAINING COLLEGES.

No. of examinations carried out during the year ... 26

CHILDREN AND YOUNG PERSONS ACT, 1933— EMPLOYMENT OF CHILDREN.

Number of children examined during the year in
connection with applications:—

(a) for employment (including entertainments)	102
(b) No. of (a) found unfit	—

ULTRA VIOLET LIGHT TREATMENT.

	Pre-School children	School children
No. of sessions held during year	227	
No. of children treated during year	59	43
Total No. of attendances ...	1,043	810

VACCINATION AND IMMUNISATION.

Immunisation against Diphtheria continues at a satisfactory level. The continued absence of a disease tends to lull parents into a sense of security and constant gentle pressure is needed to ensure that children are protected. It is satisfying to record that the vast majority of parents readily accept this valuable measure as a common duty which they owe to their child. No harmful after-effects are experienced and I have continued the practice of routine immunisation at the ordinary Child Welfare Clinics. Thus the feeling is avoided that immunisation is something "special" or complicated. At all Welfare Clinics, immunisation facilities are available and no special appointment is necessary. In 1955, a very satisfactory total of 1,391 children were given re-inforcing or "booster" doses to bolster up the level of protection during the susceptible school years.

Whooping Cough vaccination is now becoming accepted in exactly the same way as is protection against Diphtheria. A total of 399 children immunised in the Division during 1955 is reasonably satisfactory. Whooping Cough in infancy and early childhood is a dreadful and disabling disease which is sometimes fatal, and frequently gives rise to permanent chest damage. 1955 was remarkable in that only 12 cases of Whooping Cough were notified in the whole Divisional area. Of these, none had been immunised. I do not ascribe to the high level of immunisation the comparative freedom from the prevalence of the disease. As yet the total number of children immunised is too small to have any real effect. It is, however, noteworthy that of the 12 cases none had been immunised against the disease. Experience in your own area and elsewhere shows that immunisation against Whooping Cough gives a very high measure of protection and is a very well worth while procedure.

Smallpox vaccination continued at a reasonable level, with 270 new vaccinations. This is about 35 % of the total number of births. I should like to see the figure very much higher than this and would repeat my exhortations of previous years. Primary vaccination in infancy is safe, painless and completely free from complications. It causes no distress or discomfort to the infant and leaves no

objectionable scar. Whilst agreeing that Smallpox is not normally endemic in this country, it is desirable to remember that once a child has been vaccinated in infancy, it can be re-vaccinated later in life with absolutely no risk or constitutional upset. Thus, should Smallpox be introduced into this country, as unfortunately happens from time to time, re-vaccination can be carried out with the minimum dislocation.

B.C.G. Vaccination against Tuberculosis was carried out on the selected 13 year old age group. A glance at the table will show the impressive number of acceptances. It will further show that two-thirds of those tested for tuberculosis gave a negative result, indicating that they might be considered susceptible to tuberculous infection. In all, 356 children were vaccinated with B.C.G. None experienced the slightest ill-effect and all were seen 6 weeks after vaccination. 1955 will prove, perhaps, not to be a typical year, as vaccination was carried out both in the early Spring and in the late Autumn. Thus, rather more children were offered vaccination than will be the case in subsequent years. It is now a matter of general agreement that B.C.G. vaccination is likely to reduce very considerably that type of pulmonary tuberculosis which attacks the adolescent and young adult. The protection afforded helps to tide the child over the difficult years of development, and carefully controlled figures now prove, without doubt, that the vaccinated child is at a very much less risk than is his unprotected fellow. It is intended to continue this scheme and it may well be that future years will see a considerable extension to other age groups.

Contacts of cases of pulmonary tuberculosis are given B.C.G. protection by the Chest Physicians. You will note that in all 22 were thus protected.

During 1956, Poliomyelitis Immunisation will be embarked upon. At the time of writing, the scheme has already been launched and by the Autumn of the year, ample supplies of vaccine are expected to be available. I will give full particulars in my next Annual Report.

VACCINATION AGAINST SMALLPOX.

Number of Persons Vaccinated or re-vaccinated
during the Year.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	233	12	4	1	20	270
Number Re-Vaccinated ...	—	—	1	3	25	29

DIPHTHERIA IMMUNISATION.

A. Immunisation carried out during the year.

	Under 1	1 — 4	5 — 14	Total
1. No. of children who completed a full course of primary immunisation ...	311	120	130	561
2. Total number of children who were given a secondary or re-inforcing injection (i.e. subsequent to complete full course) ...	—	38	1,353	1,391

B. (a) Immunisation in relation to Child Population.

Number of children under 15 years of age who had, at 31st December, 1955, completed a course of immunisation *at any time before that date*.

Age at 31.12.55 i.e. Born in Year	Under 1 1955	1—4 1954-1951	5—9 1950-1946	10—14 1945-1941	under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1951—1955 ...	43	1,729	2,639	1,579	5,990
B. 1950 or earlier	—	—	1,192	1,123	2,315

(b) Diphtheria Notifications and Deaths in relation to Immunisation during the year.

No case of Diphtheria occurred during 1955.

WHOOPING COUGH IMMUNISATION.

A. Immunisation carried out during the year.

Age at Final injection				Number of children who completed 'full course of immunisation
Under 6 months	...	...		—
6 months to one year	...	...		285
1—2 years	...	...		102
2—3 years	...	...		3
3—4 years	...	...		9
Total				399

B. (a) Immunisation in relation to Child Population.

Number of children at 31st December, 1955, who had completed a course of immunisation *at any time before that date.*

Age at 31.12.55 i.e. Born in year	Under 1 1955	1 1954	2 1953	3 1952	4 1951	5 1950	6 1949	7 1948	Total
Number immunised	47	308	311	336	130	45	33	8	1,218

(b) Whooping Cough Notifications and Deaths in relation to Immunisation during the year.

Notifications.			Deaths.		
Age at date of notifica- tion	No. of cases noti- fied	No. of cases incl. in preceding col. in which child completed full course of immunisa- tion.	Age at date of death	No. of deaths	No. of cases incl. in preceding col. in which child had completed a full course of immu- nisation.
Under 1	1	—	under 1	—	—
1	—	—	1	—	—
2	1	—	2	—	—
3	3	—	3	—	—
4	3	—	4	—	—
5—9	4	—	5—9	—	—
10—14	—	—	10—14	—	—
Totals	12	—	Totals	—	—

B.C.G. Vaccination of 13-year old School Children.

Acceptances.

(a) No. of 13-year old children on registers at beginning of year	832
(b) No. of (a) offered tuberculin testing and vaccination if necessary	832
(c) No. of (b) found to have been vaccinated previously	—
(d) No. of acceptances	584
(e) Percentage of acceptances	70·19

Pre-vaccination Tuberculin Test.

(a) No. of children tested	559
(b) Result of test (final if two tests used)—	
(i) Positive	193
(ii) Negative	356
(iii) Not ascertained	—
	————
	TOTAL 549
	————
(c) Percentage positive	35·2

Vaccination.

No. vaccinated	356
-----------------------	-----

Tuberculin test twelve months after vaccination.

(a) No. vaccinated in 1954	—
(b) No. tuberculin tested after 12 months	—
(c) Result of test—	
(i) Positive	—
(ii) Negative	—
(iii) Not ascertained	—
	————
	TOTAL Nil.
	————

B.C.G. Vaccination—Contact Scheme.

Details of B.C.G. Vaccination of Contacts during the year
1955.

[illegible]

DOMICILIARY NURSING SERVICES.

Health Visiting.—The position in this valuable and important field of domiciliary nursing is somewhat critical. In your area, there is at present a deficiency of one Health Visitor. In addition, one Health Visitor has now reached the age when she may, at any time, voluntarily retire. I hope this day is far distant, but one must regard with a certain amount of anxiety the prospect of a shortage of two Visitors. Every effort is being made to recruit new workers of suitable type. The work of the Health Visitor is being re-adjusted, and selective, rather than routine, visiting is becoming the order of the day. The widened scope of the Health Visitor's duty, whilst adding variety and interest to her daily work, has meant that a relatively small proportion of her time can be devoted to the routine visiting of infants and toddlers. In these more enlightened times, one feels that this is a logical sequence to improved standards of education and mothercraft amongst the majority of mothers.

The Health Visitor is now concerned with work as school nurse, with care of the aged, with supervision of certain Home Helps, with staffing of ante-natal and child welfare Clinics, with visiting and advising in cases of Infectious Disease, including tuberculosis. This comprehensive range of duty calls for the highest qualities of ability and personality. I would much rather have fewer Health Visitors of the right type than be compelled to recruit others less vocationally minded. Unfortunately, there is a general shortage, and the prospects of a rapid improvement in the staffing position must be considered remote.

The relationship of the Health Visitor with the family doctor has remained good. No instance of friction or disagreement has come to light during the year, and I have reason to believe that a much friendlier atmosphere now prevails than was the case some years ago. This is as it should be. The Health Visitor has no wish to encroach on the family doctor's proper field of work. Her duty and interest lie in the field of advice and health education. I am happy to be able to place on record these views on the present situation.

Home Nursing.—Of all the Domiciliary Nursing Services, this branch is the most happily situated in relation to staffing. The Service is fully staffed with competent and conscientious nurses. The case load carried by each individual Home Nurse is reasonable and ensures that she can give to each of her patients adequate and careful attention. The standard of work throughout the year has remained at the highest level, and the report of the Supervisor in the service of the Local Health Authority has, on each occasion of her visits, been extremely good and highly laudatory. As in previous years, the work of the Home Nurse has been largely concerned with the care of the elderly and of the chronic sick. A recent trend has been the increasing number of injections which the Home Nurse has been called upon to administer on behalf of the family doctor. This work has been conscientiously and cheerfully undertaken, and must have done much to lighten the load of the general practitioner.

Home Nurses are welcome visitors in all households, and their daily visit is often eagerly looked forward to by elderly and lonely patients who rarely get news from the outer world.

Midwifery Service.—Some difficulty is being experienced in this branch owing to our continued failure to recruit a Relief Midwife. In addition, there is a tendency to reduce the number of admissions to Maternity Home or Hospitals owing to staffing difficulties being experienced in the Hospital service. Thus, an increasing load is tending to fall on a diminished amount of domiciliary nursing time. The nurses themselves make light of the position and uncomplainingly carry out their duties. Every effort is being made to obtain the services of a Relief Midwife. Unfortunately, the difficulties of obtaining simultaneously a house, a motor car, and a telephone, suitably situated in the area, deter many would-be applicants. I have endeavoured to persuade the Local Health Authority to make housing accommodation available. This they are reluctant to do. The only hope is that some nurse, whose husband takes up employment in or near this area, may become available and willing to accept the post.

The relationships between Midwife and Doctor have remained excellent

Home Help Service.—This valuable and much used Service continues and is bound to gain in importance and strength. With a reduced allocation of only 20 full-time Home Helps, stringent pruning has been necessary during the year. Every effort is made to ensure that help is given in cases where no relatives or friends are accessible. A glance at the table will show how economically help has been distributed. You will note that no fewer than 56 part-time Home Helps are employed in the Division. Their work has, with very few exceptions, been satisfactory. I would like, once again, to state my opinion that not the least valuable part of their service is the pleasure given in the case of elderly people by the visit of someone from the outside with little items of gossip and a cheerful word of friendship.

I, personally, feel that to maintain people in their own homes, in reasonable comfort and dignity, is a very well worth while social measure. Quite apart from its economic advantages to the community, the maintenance of people at home is a humane act and is in accord with the best principles of community conduct. Institutional care, however efficient, tends to be soulless and regimented. Rarely are elderly people happier in Institutional care than they would be by their own fireside.

I am glad to record that during 1955 fewer cases have come to light where relatives have not accepted some measure of responsibility. It is an unfortunate fact that full employment means that frequently both grown up sons and daughters have no time to look after indigent mothers or fathers. In these cases I feel it fair to expect them to make some private arrangements for the care of their own relatives, thus leaving the Home Help Service available for those less fortunately connected.

As predicted in my last Report, it is now appreciated that an increase in Home Help establishment must be granted and I anticipate that next year the establishment of Helps permitted in this Divisional area will be increased.

DOMESTIC HELPS.

Authorised Divisional Establishment—

(i)	Basic	...	...	20
(ii)	From Reserve Pool		...	—
				—
(iii)	Total	...	...	20
				—

Number of Domestic Helps employed at 31st December, 1955—

(i)	Whole-time	...	...	—
(ii)	Part-time	...	...	56
				—
(iii)	Total	...	...	56
				—

Cases provided with Domestic Help during year ended 31st December, 1955—

	No. of Cases	Hours employed
(i) Maternity (including expectant mothers) ...	21	1,371½
(ii) Tuberculosis ...	1	303
(iii) Chronic sick, including aged and infirm ...	222	39,290¼
(iv) Others ...	18	1,316½
Total ...	262	42,281

Employment :—

Total No. of hours of all home helps employed between 1st Jan. and 31st Dec., 1955 ÷ 2288 = No. of home helps that could have been employed full time. = 18·48 Home Helps.

LOCAL HEALTH AUTHORITY CLINIC SERVICES IN THE STANLEY URBAN DISTRICT.

No alteration has been made during the current year. There is a possibility that the Welfare premises at present situated in Rehoboth Chapel will have to be moved in the near future. Alternative premises are believed to be available and every effort will be made to secure that there is no break in the continuity of the services in the Outwood area.

All other clinics in the area are being held as usual. Weekly Child Welfare Clinics are held at Stanley, Outwood and Wrenthorpe. Some difficulty is experienced in the Stanley Clinic in respect of heating arrangements. Everything possible is being done to ensure that these are maintained in an adequate manner but, in common with all other similar premises, considerable difficulties arise in respect of staffing and the cost of fuel. Ante-Natal clinics continue, for the most part, to be moderately attended. A fall in the number of Maternity Home admissions, due to Hospital staffing difficulties, has tended to increase the number of domiciliary confinements. This, again, is having some reflection in a tendency to increased ante-natal clinic attendances. The chief value of Ante-Natal clinics to-day is educational. Reassurance and instruction can be imparted in an atmosphere of general relaxation and comfort. Mothers appreciate enlightenment on many aspects of pregnancy and childbirth.

Routine ante-natal examinations of cases booked for Maternity Home admission are carried out, and such cases are referred to the Maternity Hospital for routine check up at about the thirty-sixth week of pregnancy. Co-operation throughout the year has been close and cordial, and there has been a free interchange of information between Hospital, general practitioner and Ante-Natal clinic staffs. One or two doctors in the area hold routine ante-natal clinics at their own surgeries, whilst others visit the patient's home with the midwife and make the necessary examinations. In some cases, doctors refer their patients to the Ante-Natal clinics for the taking of blood samples. This service we are very glad to render.

Relaxation classes have been held at Wrenthorpe at weekly intervals and are much appreciated. Evidence accumulates indicating that the practical value of such instruction is very great. Mothers are most appreciative of the help which they feel has been given.

Ultra Violet Light Clinics are held on Mondays, Wednesdays and Fridays at the Central Clinic at Rothwell and are available for the children living in the Stanley area. Many years' experience has convinced me of the value of such treatment as a non-specific stimulus to growth and appetite in young children. It may be that there is a psychological factor involved, but the fact remains that parents voluntarily and frequently express their appreciation, and affirm that their children have gained in weight and vigour as a result of U.V.R. administration.

CONSULTANT CLINICS.—No change in the staffing of these Clinics has occurred during 1955. The Ophthalmic clinic is held two or three times a month as necessary, and is well attended and much appreciated. No delay occurs in the provision of glasses where necessary. Dr. Kirkwood's courtesy and pleasant manner are much appreciated by parents and children.

A Consultant Paediatric Clinic is held on the second Friday morning of each month. Dr. Pickup continues to be a tower of strength in relation to the Paediatric services in this area. His help and advice are freely available and general practitioners avail themselves readily of his services. As mentioned before, Dr. Pickup has beds in a number of local Hospitals in the Wakefield, Castleford and Pontefract areas. This factor is of great use, and much valuable work has been done during the year.

The position in relation to Ear, Nose and Throat surgery is unchanged. That is to say, no difficulty whatever is now experienced in obtaining an early consultation for any school child needing attention. It has been found more convenient to refer personally children to the Consultant Aural Surgeon at the Clayton Hospital, rather than to hold set clinics. The work is up to date and no prolonged waiting is now necessary. I feel that this part of the Service is working very well indeed, and I am glad to be able to record this fact.

It has not been found possible to appoint a successor to the Orthopaedic Nurse who resigned in 1954. Whilst her loss is deplored, there is no evidence that hardship has resulted. Miss Pearson, Consultant Orthopaedic Surgeon, holds regular orthopaedic clinics at Pinderfields. Cases requiring orthopaedic diagnosis or treatment are referred to her direct, in co-operation with the family doctor. Her reports are prompt and informative and I do not feel that any improvements in this field are urgently necessary.

The only exception to this generalisation is the relatively infrequent case where special remedial exercises are needed. The supervision of these by a nurse without special orthopaedic training, is not always easy. However, instruction is given to the supervising Health Visitor and thus all possible is done to see that the child carries out prescribed exercises.

During 1955, the Speech Therapist did most valuable work. I am sorry to have to report that Mrs. Pollard is likely to leave the service of the County Council during 1956, and thus will be lost to us. Every effort will be made to ensure that a suitable successor is appointed at the earliest possible moment.

Dr. MacTaggart at the Child Guidance Clinic, resigned during the year. A Child Psychiatrist, Dr. Leese, is to take up an appointment early in 1956 and I look forward to close co-operation with her in this very difficult field of child management.

To sum up, you can rest assured that Local Health Authority Clinic provision in your area is adequate and active. Relationships with general practitioners continue to be good, and no major misunderstandings have arisen during the year. It is being realised on all sides that the best hope for the future in this field lies in full and frank interchange of information, and a realisation that each branch of the Health Service has its own part to play in co-operation with the other Health Services.

AMBULANCE SERVICE.

This service continues to be run in a most competent and efficient manner. A courteous response is unfailingly elicited from the Ambulance Depots. A recent personal experience has emphasised the efficiency and kindness with

which the drivers carry out their duties. Any query is readily answered and the fullest information is always forthcoming from the Divisional Ambulance Officer or from the Chief County Ambulance Officer. In my opinion this is a very excellent Service and the abuse which was earlier evident is now much less so. The public appear to be taking a much more responsible view and appreciate that the Ambulance Service, though "free" to the individual, is by no means free to the community.

LABORATORY FACILITIES.

I should like again to pay tribute to the courtesy of Dr. Little and his staff at the Public Health Laboratory at Wakefield. Help is readily given and no effort is spared to undertake the necessary bacteriological investigation into any suspected case of Food Poisoning, etc. The fact that these facilities are so readily available is a source of great support and comfort. The technicians are efficient and alert and take an obvious and active interest in any investigation which they are called upon to undertake.

MILK AND FOOD SAMPLES.

Milk samples and samples of foodstuffs are forwarded to the County Analyst at Halifax. Regular analyses of water supplies are obtained from the Analyst at Bradford.

HOSPITAL PROVISION.

No major change occurred during 1955. Towards the end of the year, however, it became apparent that some reduction was likely in the numbers of normal maternity cases admitted to Maternity Homes and Hospitals in the Wakefield area. This, one understands, is due to the acute shortage of nursing staff. The factors which make patients seek admission to Hospital for a normal confinement are varied and complex. There is a general feeling that the standard of care afforded in Hospital must necessarily be higher than that provided in the patient's own home by the Domiciliary Midwifery Service. In addition, there is a financial factor involved, and it is a fact that admission to Maternity Home results in a not inconsiderable financial gain to the patient. In addition, the problem of getting somebody to "look after" the mother during her lying-in period is solved, and often the husband can cope adequately with

his domestic affairs during his wife's lying-in period in Hospital. My own view is that, given suitable housing conditions, a patient is certainly just as well cared for at home, and the baby often derives even greater benefit. Thus, I view without any apprehension the possibility that the percentage of mothers admitted to Institutional care for their confinements is likely to decrease. For the last ten or twelve years, an average of 50 per cent. of mothers have been admitted for Hospital confinement.

With improving housing provision, an adequate and competent Domiciliary Midwifery Service, the freely available services of the family Doctor, and, where necessary, home help provision, I see no reason why domiciliary confinements should not be the order of the day to a much greater extent than has been the case in recent years. The foregoing remarks do not, of course, apply to abnormal obstetrical cases. These are always admitted without question, and no difficulty has been experienced during the year in obtaining Maternity Hospital accommodation for any mother displaying any degree of abnormality calling for expert Specialist obstetrical care.

Infectious Diseases hospital provision is freely available and we are lucky, indeed, in having Seacroft Hospital so near to us. The care and skill with which patients are treated is of the very highest standard. It is pleasing to record the very close co-operation which is always given us by the Medical Superintendent and his staff. Prompt and full information is always given regarding admissions and discharges. These remarks also apply to the Infectious Diseases Hospital at Snapethorpe to which, occasionally, our cases are admitted.

Nowadays, relatively few cases of Infectious Disease need Hospital admission, but these few are sometimes in very great need of skilled care and treatment. In addition, there is the case where the diagnosis is doubtful and where it is felt that a complete investigation is necessary.

General Hospitals.—In this area we are fortunate indeed in having readily available beds in surgical and medical units of the highest standard. No delay is experienced in admitting cases needing acute treatment. Pinderfields Hospital continues to deal competently with all orthopaedic emergencies and treatments.

In relation to chronic sick, there is still a great need for increased provision. Sympathetic consideration is given to all chronic sick cases seeking admission, but the inadequacy of the number of beds available has, from time to time, caused delay and difficulty. Dr. Rosenthal, the Geriatric Consultant, is most competent and thorough, and any personal approach to him has met with prompt attention and a personal domiciliary visit to assess the need of the patient. There still exists the unfortunate gap between chronic sick and Welfare accommodation. I feel greatly the need for an intermediate type of Institution to cater for elderly and indigent patients who are suffering from deterioration in health inseparable from old age. These persons are not acceptable in chronic sick Hospitals and yet require nursing care and attention to some degree. There is a great need, which I feel will continue and will increase, for some type of hostel accommodation where a degree of nursing care can be made available.

With this exception, I feel that the needs of the inhabitants of this area are extremely well met, and that there is no reason to suggest that increased provision is desirable or necessary.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE IN THE STANLEY URBAN DISTRICT.

The only outstanding incidence of Infectious Disease in 1955 was the expected biennial prevalence of measles, which gave rise to a total of 342 cases. No serious complications were reported in any instance, although two cases were admitted to Hospital. For the rest, the only other infectious disease of any gravity was Acute Anterior Poliomyelitis—infantile paralysis—which occurred in three cases, two being children under 5 years of age, and the third an adult in middle life. I regret to state that one of these cases proved fatal.

An outbreak of Sonné Dysentery in a neighbouring Authority area gave rise to a few cases living within your boundary. All four cases notified were of very mild type and of brief duration.

Only one notification of food poisoning was received, and this suggests a satisfactory standard of hygiene in local feeding establishments and homes.

In all, only 14 cases of Infectious Disease were admitted to Hospital, 5 of these being for observation.

As I have already stated, the number of school children found to be infested with head lice or nits was extremely small in relation to the total number of children examined. No problem arose and in no instance was it necessary to issue a Cleansing Notice. This is a very satisfactory state of affairs and reflects the intense educational work carried out by the school nurses.

No case of Scabies came to notice during the year, and I have no reason to believe that there was any infestation with this parasite.

Cases of Notified Infectious Diseases in Age Groups (excluding Tuberculosis)

Disease.	Under 1 year		1-3 years		3-5 years		5-10 years		10-15 years		15-25 years		25-45 years		45-65 years		over 65 years		Totals	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Smallpox
Scarlet Fever	I	..	I	..	5	7	..	..	..	..	..	..	..	..	..	..	7	7
Diphtheria
Enteric Fever(including Paratyphoid)
Pneumonia	2	I	I	..	..	..	..	..	..	3	..	..	I	2	4	6
Puerperal Pyrexia
Acute Anterior Poliomyelitis	I	..	..	I	..	..	..	..	..	..	..	..	I	..	..	..	2	I
Acute Anterior Encephalitis
Meningococcal infection
Ophthalmia Neonatorum
Erysipelas	I	..	..	I	..	I	2
Whooping Cough	I	..	..	..	2	..	..	I	..	..	..	..	..	..	..	..	..	..	3	I
Measles ..	6	9	28	35	50	32	88	91	..	2	..	I	..	..	..	..	..	..	172	170
Sonné Dysentery	I	..	..	I	..	..	..	..	I	I	..	..	..	..	2	2
Food Poisoning	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	I	..
Totals ..	7	9	31	35	56	34	94	100	..	2	..	I	I	I	5	I	2	2	192	189

Cases of Notified Infectious Diseases (excluding
Tuberculosis) admitted to Hospital.

Disease	No. Notified	No. admitted to Hospital
Smallpox 	—	—
Scarlet Fever 	14	1
Diphtheria 	—	—
Enteric Fever (incl. Paratyphoid) ...	—	—
Pneumonia 	10	2
Puerperal Pyrexia 	—	—
Acute Anterior Poliomyelitis ...	3	3
Acute Anterior Encephalitis ...	—	—
Meningococcal Infection	—	—
Ophthalmia Neonatorum	—	—
Erysipelas 	3	—
Whooping Cough 	4	—
Measles 	342	2
Sonné Dysentery 	4	—
Food Poisoning	1	1
Observation 	5	5
Totals 	386	14

TUBERCULOSIS.

The progress mentioned in my last Annual Report has been maintained in 1955. There has been a further fall in the notification of new cases of pulmonary tuberculosis which, this year, have reached the low figure of 6. It will be noted that this is now the fourth year in which no case of non-pulmonary tuberculosis has come to notice. This I attribute to the almost universal use of pasteurised milk. Only one death occurred and this low figure has only once previously been recorded. All these facts give solid ground for satisfaction and hope for the future. The great increase in the use of Mass Radiography has much facilitated the early detection of pulmonary tubercle. The widespread use of the new antibiotics has done much to shorten the period of infectivity of active cases. The diminution in the number of patients needing Sanatorium treatment has meant a reduction, in some cases to vanishing point, of waiting time for those infectious cases needing hospitalization.

The introduction of B.C.G. vaccination to selected groups of school children will, it is hoped and expected, mean that the number of adolescent and early adult cases of acute pulmonary tuberculosis will progressively diminish.

All these factors mean a smaller and continually decreasing reservoir of infection in the population as a whole. Thus, it is hoped that the law of diminishing returns will operate, and that tubercle, as a social and widespread disease, will progressively disappear from our midst. I give this optimistic forecast in sober appreciation of all the factors concerned. A certain amount of disquiet has been expressed recently in that a number of immigrants from European countries or from our own Colonies, have been found to be suffering from active infectious tuberculosis, and have not proved co-operative in seeking treatment. In your own area, this factor is not known to have operated as yet.

Appreciation must be expressed of the readiness of your Housing Committee in accepting recommendations for re-housing of tuberculous cases considered to be likely to derive benefit from such a measure. As is my custom, I have endeavoured to approach you as infrequently as possible. Let me assure you that any recommendation I make will only be put forward after the fullest consideration of all the factors concerned. I am well aware of the many and diverse claims for special consideration which the Housing Committee must take into account.

TUBERCULOSIS.

Record of Cases during the year 1955.

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at beginning of year	35	39	4	2
No. of cases notified for first time during year	3	3	—	—
No. of cases restored to Register	—	—	—	—
No. of cases added to Register otherwise than by notification	—	2	—	—
No. removed to other districts	3	13	—	—
No. Recovered	2	—	1	—
No. died from the Disease	1	—	—	—
No. Removed from Register :—				
Revised diagnosis	2	—	—	—
No. of cases on Register at end of year	29	31	3	2

TUBERCULOSIS.

New Cases and Deaths during 1955.

Age Periods		New Cases				Deaths			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F
0—1 year	...	—	—	—	—	—	—	—	—
1—5 years	...	—	—	—	—	—	—	—	—
5—10 "	...	—	—	—	—	—	—	—	—
10—15 "	...	—	—	—	—	—	—	—	—
15—20 "	...	—	—	—	—	—	—	—	—
20—25 "	...	—	—	—	—	—	—	—	—
25—35 "	...	—	1	—	—	—	—	—	—
35—45 "	...	1	1	—	—	—	—	—	—
45—55 "	...	1	—	—	—	—	—	—	—
55—65 "	...	1	—	—	—	—	—	—	—
over 65 years	...	—	1	—	—	1	—	—	—
Totals	...	3	3	—	—	1	—	—	—

TUBERCULOSIS

New Cases and Mortality since 1936.

Year			New Cases		Deaths	
			Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1936	...	...	9	1	7	2
1937	...	...	13	11	9	—
1938	...	...	18	17	12	5
1939	...	...	24	11	10	4
1940	...	...	19	3	11	1
1941	...	...	22	12	10	2
1942	...	...	23	4	11	4
1943	...	...	24	7	9	—
1944	...	...	21	10	12	2
1945	...	...	21	5	11	1
1946	...	...	28	9	7	3
1947	...	...	16	5	8	—
1948	...	...	22	3	11	2
1949	...	...	25	2	11	2
1950	...	...	27	3	5	2
1951	...	...	18	3	8	1
1952	...	...	10	—	2	—
1953	...	...	11	—	1	—
1954	...	...	9	—	4	—
1955	...	...	6	—	1	—

HOUSING.

It is difficult to feel satisfaction at the housing position in the Stanley Urban District. As compared with 1954, only 39 housing units were completed during the year. This is a number totally inadequate to meet the clamant needs of the population. If the slum clearance programme is to be successfully completed within the five years suggested by the Ministry, there will have to be a marked acceleration in the provision of new Council houses. I am glad, however, to say that your Council have appreciated the need for a number of flats suitable for housing elderly people or couples with no children. This represents an economy of material and cost and is a trend which is likely to be followed in subsequent years. I remarked on this point last year, and have had no reason to change my mind on the subject.

I am by no means happy about the practical results arising from the Housing (Rent and Repairs) Bill. This measure seems to me to have proved too half-hearted to have produced the results aimed at. Good landlords are not encouraged to undertake major improvements and the less scrupulous type of landlord is given various loopholes, of which he often proves quick to take advantage.

HOUSING STATISTICS, 1955.

Number of dwelling houses in the District	...	5,159
Number of back-to-back houses included in above		242
1. Inspection of Dwelling Houses during the year :—		
1(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	... ..	560
(b) Number of Inspections made for the purpose	...	830
2(a) Number of dwelling houses (included under sub-head 1 above), which were inspected and recorded under the Housing Consolidated Regulations	... ..	20
(b) Number of Inspections made for the purpose	...	20
3. Number of dwelling-houses needing further action :—		
(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	... ..	226

(b)	Number(excluding those in sub-head 3(a)above) found not to be in all respects reasonably fit for human habitation	157
2.	Remedy of Defects during the Year without Service of Formal Notices.	
(a)	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	153
(b)	Number of defective dwelling-houses (exclud- ing those shown in (a) above) in which defects were remedied as a result of informal action	205
3.	Action under Statutory Powers during the Year.	
A.	Proceedings under Sections 9, 10 and 16, Housing Act, 1936 :—	
(1)	Number of dwelling-houses in respect of which formal notices were served requiring repairs	1
(2)	Number of dwelling houses which were rendered fit after service of formal notices :	
(a)	By owners	1
(b)	By Local Authority in default of owners	Nil
B.	Proceedings under Public Health Acts :—	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	2
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a)	By owners	2
(b)	By Local Authority in default of owners	Nil
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—	
1.	Number of representations etc. made in respect of dwelling-houses unfit for habita- tion	5
2.	Number of dwelling-houses in respect of which Demolition Orders were made ...	4
3.	Number of dwelling-houses demolished in pursuance of Demolition Orders and Und- ertakings from Owners (Voluntary) ...	9
4.	Any action under Sections 10 and 11 of the Local Government (Miscellaneous Provi- sions) Act, 1953? If so, what?	9
	(Houses closed—voluntary)	

D. Proceedings under Section 12 of the Housing Act, 1936 :—				
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	..	... Nil
(2)	Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	...	...	Nil
E. Proceedings under Part III of the Housing Act, 1936 :—				
(1)	Number of Clearance Areas represented during the year	...	...	Nil
(2)	Number of houses included in these areas	...	...	Nil
(3)	Number of persons to be displaced	...	...	Nil
(4)	Action taken during the year in respect of Clearance Areas :—			
	(a) By Clearance Orders, number made			Nil
	(b) By Compulsory Purchase Orders, number made	...	...	Nil
(5)	Number of houses in Clearance Areas demolished during the year	...	...	1
(6)	Number of persons re-housed from houses demolished during the year	...	...	57
	(From one clearance area and one individual unfit house)			
4. Housing Act, 1936—Part IV—Overcrowding.				
(a) (1)	Number of dwellings overcrowded at end of the year	...	...	73
(2)	Number of families dwelling therein	...	...	94
(3)	Number of persons dwelling therein	...	...	397
(b)	Number of new cases of overcrowding reported during the year	...	...	6
(c) (1)	Number of cases of overcrowding relieved during the year	...	...	13
(2)	Number of persons concerned in such cases	...	...	63
5. New Houses.				
Number of new houses provided during the year :—				
By the Local Authority :—				
	Permanent type	...	...	39
	Temporary type	...	...	Nil
	By Private Enterprise	...	...	14
6. Housing Act, 1949.				
Section 4—Any action in connection with advances for purpose of increasing housing accommodation ?				
		...	...	Nil
7. Housing Act, 1949, as amended by Housing Repairs and Rents Act, 1954.				
Grants to persons other than local authorities for improvement of housing accommodation.				
	Any action during the year ?	...	...	11

SANITARY CIRCUMSTANCES OF THE AREA.

The water supply of the District continues to be satisfactory in quantity and quality. The total consumption in the district was 195,191,000 gallons. Of this, 31,286,000 were used for trade purposes, and the balance of 163,905,000 gallons was accounted for by domestic purposes and leakage respectively.

The average daily consumption per head for domestic purposes was 26·09 gallons and for trade purposes 5·00 gallons.

There are no wells and no stand-pipes in use in the district. The water is without plumbo-solvent action and is obtained by arrangement with Wakefield Corporation. I should like to take this opportunity of recording the fact that, in spite of the very great difficulties experienced by Wakefield Borough during the drought of 1955, the water supply to the Stanley area was satisfactorily maintained, although the most stringent measures were proving necessary within the City boundary. This fact is, I feel, worthy of note and indicates a very friendly and co-operative spirit.

Two samples were taken during the year and below is the chemical analysis of one of the samples taken.

				Parts per million.
Total Solids	...	...	...	144
Mineral Matter	...	...	...	108
Chlorides as NaCl	...	...	...	30
Free Ammonia	...	...	...	0·044
Albuminoid Ammonia	...	...	...	0·056
Oxygen absorbed in 4 hrs. at 80° F.	...	...	...	0·22
Nitrous Nitrogen	...	...	...	Nil
Nitric Nitrogen	...	...	...	0·26
Temporary Hardness	...	...	...	10
Total Hardness	...	...	...	64
Permanent Hardness	...	...	...	54
Alkalinity in terms of CaCO ₃ to M.O.	...	...	...	10
Acidity CaO	...	...	...	Nil
Free Chlorine—actual free	...	...	...	0·08
Total including chloramines	...	...	...	0·02
pH Value	...	...	...	6·6
Colour—Hazen units	...	...	...	Nil
Turbidity—Silica scale	...	...	...	Nil
Manganese	...	...	...	Nil
Lead in solution	...	...	...	Nil
Lead dissolved in 24 hours	...	...	...	Nil
Iron as F.E.	...	...	...	·10

Sewage Works.—Considerable improvements and alterations are in the course of construction at the Smalley Bight sewage works and it is expected that the work will be finished early in 1956. This measure was, as indicated, very greatly needed and should bring the works up to modern standards.

Drains and Sewers.—No major scheme of alteration has been undertaken during the year, and no damage due to subsidence has been reported.

Closet Accommodation.—Two waste water closets were converted to W.C.'s during the year and the following table shows the continued improvement in comparison with 1926.

<i>Year</i>	<i>No. of Privies</i>	<i>No. of W.C.'s</i>	<i>No. of Waste W.C.'s</i>
1926	1,092	1,387	12
1955	65	3,029	6

Public Cleansing.—The cleansing of the district is done by direct labour and the Service has been adequately maintained. The mechanical gully emptier is employed for the emptying of cesspools and this is done without nuisance. There are 15 cesspools in the district and these are emptied monthly.

Rivers and Streams.—No action necessary during the year.

Shops and Offices.—No complaint was received and no action has been necessary during the year in respect of any premises.

Camping Sites.—There are no official camping sites in the area. Some nuisance has arisen from time to time in relation to the land near the Drum and Monkey Inn. The Council will have to consider whether or not to take drastic action in relation to recurrent nuisances arising as a result of the conduct of caravan dwellers who, from time to time infest this area.

Swimming Baths and Pools.—No public baths in this area.

Bug Disinfestation.—This procedure is by no means commonly needed nowadays. Modern insecticides prove efficient and there has been a very low incidence of verminous premises.

Smoke Abatement.—Lofthouse Colliery still continues to pour out large volumes of smoke from time to time. One understands the difficulties being experienced by the staffs of the N.C.B. From the point of view of amenity, however, there is no doubt that the District will be greatly improved if and when the proposed electrification of the pit is completed.

No serious complaint has arisen during the year regarding the Miners' Hostel.

Colliery Spoil Heaps.—Every effort has been made to ensure that combustion has been reduced to a minimum. Sprays are usually adequate in number and are vigorously used.

Offensive Trades.—The Knacker's yard has given rise to no nuisance during the year. It is regularly visited and inspected and is considered to be carried on in a satisfactory manner.

Fried Fish shops are now no longer officially regarded as "offensive trades." They are regularly visited and it is a pleasure to say that the standards of hygiene observed in these establishments are second to none. This is, no doubt, due to the many years of close supervision which has been exercised, and fish friers as a trade are in the forefront of progress and are most co-operative and anxious to do all they can to ensure that their premises and the food prepared therein are spotless and carefully handled.

Factories and Workshops.—Parts 1 and 8 of the Act fall within the scope of administration of this Authority. Appended is a list of Outworkers and it will be noted that no special action has been necessary throughout the year. Routine inspections have been carried out in respect of Part 1 of the Act, and again no special action has been necessary.

FACTORIES ACTS, 1937 and 1948.

	No. on Register	Number of:—		
		Inspections	Written Notices	Occupiers prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	22	20	Nil	Nil
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	31	58	Nil	Nil
3. Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	—	—	—	—
TOTAL	53	78	—	—

CASES IN WHICH DEFECTS WERE FOUND (If defects are discovered on two, three or more separate occasions, they should be reckoned as two, three or more cases).

				No. of cases in which defects were found				Number of cases in which Prosecutions were instituted
				Found	Remedied	Referred :		
						to H.M. Inspector	by H.M. Inspector	
Want of cleanliness	--	—	—	—	—	
Overcrowding	--	—	—	—	—	
Unreasonable temperature	--	—	—	—	—	
Inadequate ventilation	—	—	—	—	—	
Ineffective drainage of floors		..	--	—	—	—	—	
Sanitary Conveniences :—								
Insufficient	—	—	—	—	—	
Not separate for sexes	—	—	—	—	—	
Unsuitable or defective	—	—	—	—	—	
Other offences against the Act (not including offences relating to Outwork)	..		--	—	—	—	—	
Total	—	—	—	—	—	

OUTWORK.

Nature of Work	No. of Out-workers in August list required by Sec. 110 (1)	Section 110		Section 111		
		No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices Served	Prosecutions
WEARING APPAREL :—						
Making, etc. ..	3	—	—	—	—	—
Cleaning and washing	—	—	—	—	—	—
Textile Weaving ..	—	—	—	—	—	—
TOTAL ..	3	—	—	—	—	—

SANITARY INSPECTION OF AREA.

Infectious Disease Prevention.

Inspections	...	...	...	14
Further Enquiries	...	...	...	—
Disinfections	...	...	...	6
Schools Disinfected	...	...	...	—
Miscellaneous Visits	...	...	...	2
Scabies Visits	...	...	...	—

Milk and Dairies.

Inspections of Cowsheds and Dairies	...	...	...	—
Milk Samples taken	...	...	...	33

Food and Drugs Inspections.

Meat Inspections	...	...	...	916
Bakehouses	...	...	...	58
Food Inspections...	...	...	...	374
Ice Cream Sampling	...	...	...	—
Water Sampling	...	...	...	3
Fish Shop Inspections	...	...	...	36

Housing.

Houses inspected and recorded	...	...	...	560
General Surveys	...	...	...	20
Public Health Act Inspections	...	...	...	230
Re-visits	...	...	...	295

Offensive Trades.

Inspections of Knackers' Yards	...	...	...	10
Inspections of Blood Boiling premises	...	...	...	—
Inspections of Fat Refining premises	...	...	...	—

Sanitary Matters.

Inspections of Verminous Premises	...	...	...	12
Inspections for Rat and Mouse Infestations	...	...	...	240
Inspections of new drains	...	...	...	5
Smoke observations	...	...	...	10
Inspections re Refuse Removal and Disposal	...	...	...	410
Factories and Workshops	...	...	...	78
Tents, Vans and Sheds	...	...	...	50
Number of Statutory Notices (Housing Act and Public Health Acts)	...	...	...	3
Number of Statutory Notices (Sect. 17 of the Housing Act, 1936)	...	...	...	—
Number of Nuisances abated on serving Statutory Notice (Public Health Acts)	...	...	...	3
Inspections for Nuisances	...	...	...	590
Council House Inspections	...	...	...	620
Inspection of Repairs	...	...	...	242
Visits re Council House applications	...	...	...	165
Miscellaneous	...	...	...	300

STANLEY URBAN DISTRICT COUNCIL

ANNUAL REPORT
OF THE
SANITARY INSPECTOR
AND CLEANSING SUPERINTENDENT
(D. WALKER, A.R.S.H., M.S.I.A.)
For the Year
1955.

*To the Chairman and Members of the
Stanley Urban District Council.*

Gentlemen,

I beg to submit this, my Sixth Annual Report, upon the work done by your Health Department during the year.

Many of the records of inspections and statistical data are to be found in the earlier part of the report. The costs of labour and materials used for housing repair work continue to increase making it increasingly difficult to get repairs of any description carried out to the older types of cottage property in the district. The shortage of labour in the district for repair work has become more marked owing to the general preference of contractors to remain on new work rather than the repair work.

During the year the only houses which have been available for letting appear to have been limited to those built and let by the Council, as practically all privately owned houses which have become vacant have been sold almost irrespective of their condition although the demand for this type of property has not been so great as in the past three or four years and some difficulty is being experienced in obtaining the prices which they have up to recently commanded.

As required by the Housing Repairs and Rents Act, 1954, a survey to ascertain a list of the properties to be dealt with under Slum Clearance over the next five years was carried out and returned to the Ministry before the appointed day of 1st August, 1955.

As in the past two or three years, many owners are prepared not to relet old property as and when the present tenants move and then to demolish the houses when the whole of the property becomes vacant. I am pleased to say that this is a suitable arrangement from many points of view and so far in no case has an owner gone back on his word.

Improvement grants have become more popular but appear to attract only the owner occupier and not the owner of the houses which are let and the Rents Act, 1954, does not appear to have attracted any great investment in repairs by landlords for the purpose of increasing rents.

During the year 39 houses were completed by the Council and included 26 one bedroom type flats.

The application lists show at the end of 1955 there were 375 applicants for Council houses.

The volume of meat inspection work has increased greatly during the twelve months but I can assure you that all the meat killed in the district is inspected with very small delay to the butchering trade and not at the expense of other work.

I should like to express my appreciation to the Chairman and to other members of the Council for the encouragement and consideration they have given me during the past twelve months.

Abatement of Nuisances.

Number of Privies converted into W.C.'s	...	—
Do. Waste water closets converted into W.C's	... ..	1
Do. W.C's provided	... ..	—
Do. Choked drains and W.C.'s cleared	...	284
Do. Choked sewers cleared	... ..	—
Do. Sink wastes repaired	... ..	10
Do. Defective drains relaid	... ..	6
Do. New drains laid	... ..	6
Do. Gully traps fixed	... ..	—
Do. Water closets repaired	... ..	30
Do. Inspection chambers repairs	...	2
Do. Eavesgutters/downspouts repaired		49
Do. House roofs and damp walls repaired		62
Do. Flooded Cellars	... ..	18
Do. Damp houses remedied	... ..	141
Do. House floors repaired	... ..	16
Do. Walls replastered	... ..	59
Do. New sinks fixed	... ..	13

Number of Windows recorded and repaired	...	36
Do. Fireplaces repaired	...	50
Do. Washing coppers repaired	...	4
Do. Defective dustbins removed	...	308
Do. Privy middens abolished	...	2
Do. Ashpits abolished	...	2
Do. Dustbins provided in lieu of ashpits		2
Do. Verminous premises	...	15
Do. Dirty premises	...	6
Do. Beetle infested premises	...	15
Do. Rat infested premises	...	86
Do. Burst services	...	60
Do. W.C. Soil pipes repaired	...	30
Do. Ceilings repaired	...	—
Do. Doors repaired/renewed	...	12
Do. Bath wastes repaired	...	—
Do. Cooking Ranges repaired	...	50
Do. Defective chimneys	...	2
Do. Insanitary yards	...	4
Do. Accumulations of refuse	...	1
Do. Dangerous buildings	...	10
Do. Insufficient W.C. accommodation	...	—
Do. Dangerous walls	...	—

Meat and Food Inspection.

Meat inspection has taken up a great deal of time during the past year which has been the first full twelve months since meat was de-rationed in June, 1954.

Slaughtering at the Farm Stores Bacon Factory has continued and the rate of killing has again been stepped up with the increased demand for meat. Whilst a large proportion of the animals killed are used for bacon, a large percentage are being despatched to shops outside the area as pork.

A system of meat marking under the Public Health Meat Regulations, 1926, has now been in operation since January, 1955, and has worked satisfactorily with co-operation on both sides.

All cases dealt with at the Factory are stamped whether for use as bacon or butcher's meat. During the past twelve months 23,403 carcasses have been stamped by the inspector who is on duty at all times when slaughtering is being carried on.

The factory has maintained its high standard of efficiency during the year and has left little to be desired from the Public Health point of view although it may be necessary at some later date for cooling room to be provided for the beef being slaughtered here.

Seven slaughterhouse licenses were renewed for a further period of thirteen months and in addition to these the Local Hospital Board operate a slaughterhouse for the slaughter of animals for food in the hospital and as such does not require a licence.

As far as is aware, all of the animals slaughtered in the district are inspected and there is no suspicion of any animals which have been slaughtered having not been inspected. The quality of the meat being killed is generally good and the percentage of condemned meat is low and pigs in particular have shown a lessening in the percentage of condemnations over past years.

The slaughterhouses generally speaking are of good construction and the methods of handling the meat show an improvement over those which were adopted during the period of meat rationing.

Pigs slaughtered for home consumption have been inspected upon request and the owners advised accordingly.

The Public Health Laboratory staff at Wakefield are most helpful and have on several occasions been good enough to examine and advise on specimens of a doubtful character which have been taken down to the laboratory.

One case of Anthrax was met with during the year which was a casualty cow at one of the local farms and was dealt with by the Local Authority under the Disease of Animals Act, following notification of suspected Anthrax by the meat inspector who had been called in to examine it.

Whilst slaughtering is carried on by the various butchers at all times of the day and evening they have during the year co-operated with the department respecting the inspection of the meat and I am pleased to say that it has only been necessary for your inspectors to work overtime on rare occasions.

Total Visits ... 916.	Cows inspected ...	927
	Cattle „ ...	719
	Pigs „ ...	27,963
	Sheep „ ...	1,940
	Calves „ ...	34

Condemnations.

4 Cow Carcases	...	1546 lbs.	Generalised Tuberculosis
1 „ Carcase	...	...	Anthrax
2 „ Carcases	...	1040 lbs.	Septic metritis
2 „ „	...	621 lbs.	Oedema
1 Heifer Carcase	...	334 lbs.	Generalised Tuberculosis
1 Bullock „	...	190 lbs.	Oedema
3 Calf „	...	50 lbs.	Immaturity
Beasts' Heads and Tongues	...	122	Tuberculosis
„ „ „ „	...	1	Abscesses
„ „ „ „	...	6	Actinomycosis
„ „ „ „	...	4	Cysticercus bovis
„ Kidneys	...	21	Nephritis
„ „ ...	...	2	Tuberculosis
„ Livers	...	36	„
„ „ ...	...	19	Abscesses
„ „ ...	...	1	Echinococcus cysts
„ „ ...	...	42	Cirrhosis
„ „ ...	...	25	Angioma
„ Hearts	...	2	Pericarditis
„ Lungs	...	200	Tuberculosis
„ „ ...	...	1	Pneumonia
„ Mesentery fats	...	69	Tuberculosis
„ „ „	...	1	Pentastomi
Cow Udders	...	172	Mammitis
Pigs' Heads	...	938	Tuberculosis
„ Plucks	...	117	„
„ „ ...	...	338	Pleurisy and Peritonitis
„ Mesentery fats	...	429	Tuberculosis
„ Livers	...	698	Cirrhosis
„ „ ...	...	1	Tuberculosis

Pigs' Lungs	...	...	...	2	Tuberculosis
„ „	...	...	...	3728	Pneumonia
„ „	...	...	...	1268	Pleurisy
„ Hearts	...	...	...	505	Pericarditis
„ Kidneys	...	...	...	285	Nephritis
„ Flair fats	...	...	...	262	Peritonitis
„ Stomachs	...	...	...	141	„
„ „	...	...	...	2	Tuberculosis
Sheeps' Livers	...	...	...	48	Flukes
„ Lungs	...	...	...	65	Strongyles
Sheep Carcase	...	...	...	53 lbs.	Pyrexia
21 Pigs' Carcases	...	...	...	3757 lbs.	Generalised Tuberculosis
14 „ „	...	...	...	1225 lbs.	Pyrexia
2 „ „	...	...	...	178 lbs.	Bruising
21 „ „	...	...	...	1332 lbs.	Oedema
4 „ „	...	...	...	396 lbs.	Moribund
3 „ „	...	...	...	165 lbs.	Swine Fever
1 „ „	...	...	...	61 lbs.	Pyæmia
1 „ „	...	...	...	94 lbs.	Septicæmia
4 „ „	...	...	...	288 lbs.	Erysipelas
1 „ „	...	...	...	92 lbs.	Jaundice
1 „ „	...	...	...	60 lbs.	Septic Pleurisy
4 „ „	...	...	...	331 lbs.	Septic Peritonitis
2 „ „	...	...	...	146 lbs.	Septic Pneumonia
6 „ Forequarters	...	...	...	188 lbs.	Tuberculosis
Pork Trimmings	...	...	...	584 lbs.	Abscesses, Oedema, Tuberculosis
12 Beasts' Forequarters	...	...	...	1287 lbs.	Tuberculosis
2 „ Kidney fats	...	...	...	30 lbs.	Necrosis and Tuberculosis
Beef trimmings	...	...	...	620 lbs.	Bruising, Oedema, Tuberculosis
1 Beast Hindquarter	...	...	...	150 lbs.	Tuberculosis

Carcases Inspected and Condemned.

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ..	719	927	34	1940	27963
Number Inspected ..	719	927	34	1940	27963
<i>All Diseases except Tuberculosis :—</i>					
Whole carcases condemned	1	5	3	1	58
Carcases of which some part or organ was condemned	43	182	Nil	113	6717
Percentage of the number inspected affected with disease other than tuber- culosis ..	6.4	20.3	8.8	5.9	24.0
<i>Tuberculosis Only :—</i>					
Whole carcases condemned	1	4	Nil	Nil	21
Carcases of which some part or organ was condemned	56	355	Nil	Nil	928
Percentage of the number inspected affected with tuberculosis ..	7.9	38.7	Nil	Nil	3.5
<i>Cysticercus Bovis :—</i>	1646	Nil	Nil	Nil	Nil
Carcases affected ..	4	Nil	Nil	Nil	Nil
Carcases subjected to freez- ing treatment ..	2	Nil	Nil	Nil	Nil

Milk and other Foods.

33 official samples of milk were purchased from retailers in the district and submitted to the Public Analyst for analysis.

Whilst two of the samples were found to be defective in milk solids other than fat, the freezing point test showed them to be genuine milk.

Almost all the milk sold in the district is of the Special designated types and at present there are only four producer retailers delivering, as most of the milk is being pasteurised and is brought in by local retailers from Leeds, Castleford and Bradford

There is a moderate demand for sterilized milk which is sold from grocers' shops in sealed bottles.

There were 51 registered milk retailers in the district at 31/12/55.

374 visits have been made for the purpose of inspecting the various food shops and food preparation places in the district and it was found necessary to condemn the following articles of food :—

Tinned stewed steak	...	12 lbs.	Blown tins
Gammon	...	20 lbs.	Decomposition
Bacon	...	10 lbs.	Decomposition
Ox Tongues	...	18 lbs.	Decomposition

During the year the bye-laws relating to the handling and delivery of food have been enforced where necessary. The use of newsprint in food shops appears to be on the decline and it is hoped that before long it will be no longer used as a wrapping in immediate contact with open foods.

The fixing of gas geysers to give a constant supply of hot water to food preparing and selling premises has continued although there are still the odd few who prefer to keep the gas ring and kettle as a source of supply and it is hoped that eventually they will decide to go over to geysers.

Bakehouses.

58 inspections were made of the bakehouses in the district and only a few minor defects were noted. These were made good on verbal intimation to the owners concerned and in no case was it necessary for any legal action. One of the largest bakehouses in the district was bought by a large confectionery and baking firm whose headquarters are in Wakefield and the use of the bakehouse discontinued. This is in line with the modern trend for the centralisation of the manufacture of foodstuffs generally.

There are 7 bakehouses in the district and all are in good condition.

Ice Cream.

There are no ice cream manufacturers in the area and all ice cream sold by the shops is prepacked and of well-known proprietary brands as there has been further taking over of the small manufacturing firms by the larger ones of national repute.

Lollipops are sold in large quantities by almost all the shops registered for the sale of ice cream.

42 shops are registered for the sale only of ice cream under the Food and Drugs Act, 1938, and are regularly inspected.

Ice Cream sales from vans increased during the hot summer and there has been a marked improvement in the type of vans being used as almost all of them have been specially built for the purpose and in almost all cases washing facilities have been provided for the use of the driver.

Food Hawkers.

19 such Hawkers are registered under the West Riding General Powers Act, Section 76, and 10 premises for the storage of food for hawking. The types of vehicles used vary greatly and leave much to be desired in many cases owing to the very limited facilities which can be provided.

Offensive Trades.

No offensive trade is carried on in the district although fat melting and extracting is carried on on a small scale at the Bacon Factory and Local Kitchen waste processing plant but hardly on such a scale as to class as a trade.

The Kitchen waste plant gave rise to several complaints during the year owing to smoke and smell. Nuisance from this plant has become more in evidence owing to the fact that almost 180 houses have been built in this area since the war.

The Knacker's Yard at Kirkhamgate is in good structural condition and the owners keep the place in a satisfactorily clean condition. Business at the yard has lessened during the past few years and almost all the animals taken there are those which have died at local farms, etc. 10 visits were made to the yard during the year.

Fish and Chip Shops.

Although no longer an offensive trade these shops were visited regularly and during the year 36 visits were made. Generally speaking there is a very good class of shop in the area and improvements are constantly being made to almost all of them by request from this department and often by reason of improvements brought about by the trade itself. There are 20 registered under the Food and Drugs Act, 1938.

Factories and Workshops.

78 visits were made to factories and workshops in the district and the premises were found to be generally satisfactory. No notice was received from H.M. Inspector of Factories in respect of any fault found by his department. Improvements to fire escape facilities were put in hand at two of the larger factories during the year.

The number of premises on the register at the end of the year was 31 with mechanical, and 22 without mechanical power.

Smoke Abatement.

Smoke from industrial chimneys in the district is limited to that from two colliery chimneys, three brickworks chimneys and a small number of small factory chimneys.

As in previous years the chief sources of complaints are the two Colliery chimneys and particularly the one at Lofthouse Colliery which has been a source of complaint for many years.

Since August, Parkhill Colliery has shown no appreciable smoke owing to alterations and electrification which have been carried out. In the case of Lofthouse Colliery however there appears to be little hope of any early improvement.

The Miners' Hostel chimney at Stanley has given rise to complaints from tenants in the neighbouring residential property as in past years. Whilst the smoke emitted from this chimney is not within the definition of being "black smoke," the low elevation of the chimney makes it such that the smoke at times blows down on to the neighbouring houses with consequent nuisance. As has been stated previously the only remedy to this is by highering the chimney or the use of a smokeless type of fuel.

Whilst the Council continue to instal at least one approved type of fireplace in all new houses built by them, the chief source of fuel in the area is bituminous coal including a large percentage of Miners' home coal and this is used in place of smokeless fuel which should be used with these fireplaces. Until compulsion comes in respecting the use of smokeless fuels there will be only slight diminution in the quantity of smoke produced in the area from domestic chimneys.

During the year 10 observations were taken of various chimneys known to be the worst in the district and 4 gave readings of smoke emission for periods exceeding three minutes in thirty.

Colliery Tips.

During the year there was no real nuisance from Colliery tip fires. The tips at Lofthouse Colliery appear to have burnt themselves out almost completely and there is no sign of fire from either of them.

A portion of the smaller tip has been removed for the purpose of road making and it is possible that sooner or later the materials from the two stacks could be further made use of for this purpose or the stacks planted on and thus hide their appearance.

The tip at Stanley which is being used by Newlands Colliery showed signs of active fire but by suspending tipping operations temporarily the nuisance was reduced to a minimum.

Housing.

A considerable amount of time has been paid to general housing inspections and all complaints from tenants have received early attention. As in past years a considerable amount of repair work has been obtained to many houses but it is becoming increasingly difficult to get even the more essential repairs done to the older types of cottage property which is in many cases fit only for condemnation and for which only the minimum repairs are asked. A further difficulty in the form of acute labour shortage has been experienced and owners are finding it difficult to get even the essential repairs attended to on fairly modern and good type property.

With the Housing Repairs & Rents Act, 1954, it was suggested that it would be easier to get repair work done but the result in this district has continued to be poor and only few owners have applied the rent increase section. During the year there were five applications for Certificate of Disrepair which were all granted. One application by an owner for revocation of a certificate was granted.

In addition to these certificates many owners and tenants were advised regarding the application of the Act.

The West Riding County Council (General Powers) Act has provided more expeditious methods to deal with certain types of defects than were available under the Public Health Act, 1936, and has proved to be a great help in enforcing the carrying out of urgent repairs.

5 houses have been dealt with under Section 11 of the Housing Act, 1936, but this is only touching on the fringe of the problem. Owners are now prepared and often glad to give undertakings that they will not relet houses and demolish them should the present tenants be rehoused. I am pleased to say that so far all these undertakings have been kept even though in some cases the tenants have not moved to Council houses.

The Housing Survey as required by the Housing Repairs and Rents Act, 1954, was completed and submitted to the Ministry early in 1955. The survey was not of a house to house type but based upon knowledge of the external appearance of the various properties in the district. 295 houses were included for clearance and demolition during the five years commencing August, 1955 but it will be necessary even when these houses have been dealt with for Slum Clearance to

continue for many years especially if there is no great increase in the quantity of repairs which can be carried out to old property in the district. The 242 back to back houses in the district present a problem as in many cases it would be possible for conversions to be carried out to make them fit houses.

Only 39 Council houses were completed during the year which was very disappointing. 26 of these were the single bedroom flats. 2 of these houses were let to tenants of condemned houses. 1 to a special case, and 6 to persons in lodgings.

There is still an acute shortage of housing accommodation in parts of the area in addition to families needing houses because of bad housing accommodation, this being shown by the Council house application list which at 31/12/55 showed 83 applicants in lodgings and never having had a proper house of their own.

Details of the application list at 31/12/55 :—

In Lodgings	...	...	...	83
Not in Lodgings	...	...	...	258
Out of Area	...	...	...	34
				—
				375
				—

This figure shows a reduction of 140 on the figures at 31/12/54.

Interviews with many of the Council house tenancy applicants have revealed that the high rents of new houses are causing many families to either withdraw their applications or ask for a relet of a prewar house and there is a continued seeking of exchanges from post war houses.

Greater use is now being made by Owner/Occupiers of the improvement grant schemes available under the Housing Act, 1949, and during the year 11 grants were made by the Council. The chief reason for these grants was the provision of hot water and bath systems and inside W.C's.

Overcrowding.

Figures of Families overcrowded are not actually available but houses known to be housing more than the legally permitted number of persons, at the end of the year numbered ten.

The standard of overcrowding which has been adopted by the Council for their points scheme for rehousing is similar to that laid down in Section 136, Housing Act, 1936, and is based on bedroom accommodation rather than total room accommodation. On this standard the lists show that 87 applicants for Council houses, not including persons living in lodgings, were living in conditions considered to constitute overcrowding.

In addition to these, 9 families occupy houses where the sleeping accommodation causes moral overcrowding.

Privy Conversions.

The privy conversion programme is now almost completed and almost all of those left either serve property fit only for condemnation or have not a sufficient water supply or sewer available.

During the year one waste water closet was converted to a W.C. In addition to the conversions in use as shown in the table there are 14 pail closets.

No. and Type of Closet			No. and Type of Ashpits				Cess-pools emptied by Sanitary Staff
Privies to convert in all parts of the District	Water Carriage System		Total No. of Ashpits of all kinds	Privy Ashpits	Dry Ashpits	Bins	
	Fresh Water	Waste Water or Hand Flushed					
65	5,029	6	44	34	10	5,106	15

Cesspools.

The 15 cesspools and all the road gullies in the district are cleansed regularly by means of the Council's own 750 gallon mechanical gully and cesspool emptier. The work is carried out satisfactorily and hygienically and by loaning out the machine to the West Riding County Council, Horbury U.D.C., and Ossett M.B.C., the service is provided for our own district very economically.

Gross Income from these Authorities during the year amounted to £744.

The cesspool at Lindale Farm is in very poor condition and is being overloaded due to the draining into it of additional appliances. The cesspool was only meant in the first place to serve the sink wastes to these houses but the recent additional drainage from new houses, a dairy, and several W.C.'s has caused the overloading.

A scheme is now proposed to install a pumping station to pump the sewage into the Council's sewer in Batley Road and it is hoped that when the scheme is completed at an early date during next year it will make further housing development possible in this part of the district.

Sewers in various parts of the district are flushed regularly with the gully/cesspool emptier. The flushing is necessary due to various degrees of back fall in these sewers caused by mining subsidence and will require relaying sooner or later. Sewers in Newton Lane and Lime Pit Lane give rise to nuisance during times of heavy rain and the one in Lime Pit Lane particularly will have to receive attention in the near future.

Water Supply.

All occupied premises in the district are on town's water which is bought from Wakefield Corporation. Low pressure and poor supply is experienced in various parts of the district and it will be necessary for many mains to be renewed before many more years. Results of samples of water are received regularly from Wakefield Corporation, all of which show the water to be of satisfactory quality and the only complaints during the year have been of over chlorination.

Tents and Caravans.

Only two caravans are now used in the district as permanent dwellings. One of the public houses utilises a field at the rear as a site for travelling salesmen at various times of the year. The use of this site is limited to four families at any time and a proper water supply and sanitary accommodation are provided and maintained.

The site is not licensed and has been used in this way for a number of years. Unless fairly strict supervision is maintained by regular visits, nuisance is often caused to the occupiers of adjoining property.

Disinfection.

The Disinfection of infected premises is done by means of formalin lamps and spray.

Number of Disinfections	6
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Verminous Premises.

Liquid insecticide has been the only material used at premises infested with bugs, fleas, etc., and has given good results. As in the past few years the number of premises found to be verminous has been low which is due in no small part to the better standard of living being enjoyed and the fact that less low quality second hand furniture is being bought by people, who years ago could not afford the type of furniture they now buy.

Prior to removal to Council houses all tenants' old houses are inspected and spraying carried out only if necessary.

Gammexane dust has been used with success against cockroaches.

Periodic spraying of the tips infested with crickets has again been necessary owing to the hot summer.

The work previously carried out by the rodent operator has been carried out by other members of the staff as necessary. Infestations where found have been on a small scale and chiefly at premises where livestock, such as pigs, etc., are being kept. The refuse tips and sewage works are poison baited regularly.

Urinals.

The two public urinals in the district have been regularly cleansed but as in the past they have been subject to much abuse by members of the public. Lighting has now been installed in both the conveniences. No new ones have been constructed during the year but the problem will have to be faced as more and more public houses place the ones provided for the public houses inside the main buildings.

Cleansing and Salvage.

The service is carried out by direct labour and during the year the collections have been satisfactorily maintained, this being made possible by the good weather which was experienced. Only few complaints were received respecting this service and most of those received were of a trivial character and easily dealt with.

Unlike most districts the question of staff presented small difficulty and when vacancies occurred these were easily filled. It is regretted that the only vacancies were brought about by the deaths of two employees, both of whom had been with the Council for many years.

The vehicles employed in the department are two Karrier Bantams, one S & D Fore and Aft Tipping Freighter, one Gully/Cesspool emptier and one "pick-up van" which is also used in other departments.

During the year there was a marked diminution in the quantity of ashes being disposed of and in many cases during summer practically the whole of the refuse consisted of material which could have easily been disposed of on the domestic and garden fires. In particular the amount of garden fires. In particular the amount of garden refuse in the bins has shown a great increase.

Tipping is being carried on at Bottomboat, Lee Moor, and Jerry Clay Lane. The tips are in satisfactory condition and I am pleased to say that in spite of the exceptional summer there has been no tip fires.

Salvage has again shown itself to be an essential and important part of the department from the economical point of view and the price of baled waste paper was increased to £8 per ton, which is over the guaranteed price of £6 10s. 0d. given by the Mills.

Baling difficulties were overcome during the early part of the year by the installation of an electric baling press and the baling of paper being carried out at a contract price of £2 10s. 0d. per ton after normal working hours.

The system worked satisfactorily and the collections of waste paper are now in the region of 15 tons per month and still rising.

£1,320 was realised by the sale of salvage materials, made up as follows :—Paper £1,070. Metal and Rags £250.

The bonus scheme adopted by the Council some years ago has continued and £267 was paid out as bonus to the workmen during the year.

The bin provision scheme has completed its fourth full year and during the year 308 new bins have been provided.

Owing to purchase tax alterations bin prices again increased considerably, causing heavy extra cost to the scheme. $2\frac{1}{2}$ and $3\frac{1}{4}$ cu. ft. bins are being used and are readily available.

Petroleum Spirit Stores.

There are 18 premises registered with the Council for the storage of petrol in quantities ranging from 100 gallons to 4,000 gallons.

Regular visits are made to the premises to see that the regulations and safety precautions are being carried out.

Miscellaneous Table.

Letters sent out—General	...	...	2990
Informal notices—Housing	...	...	616
Legal notices—Abatement of Nuisances	...	...	2

I remain, Gentlemen,

Your obedient servant,

D. WALKER.

